

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S2		8.29.01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	R	5117	02/17/01
RESPONSE FORMALITY REVIEW	AM	917	12-05-01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
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Claim	Date
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If more than 150 claims or 10 actions
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02/18/01
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Claim	Date
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Claim	Date	Final	Original	Claim	Date	Final	Original
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